EXHIBIT A

I/we: Laurel Bresaz, surviving spouse of Brandon Marshall (Please print your name(s)) hereby represent and affirm or swear the following under penalty of perjury: died on December 10, 2013 in San Jose, California, USA; and 1. That Brandon Marshall 2. Brandon Marshall was a Named Plaintiff in this Litigation and also meets the definition of a (Name) Settlement Class Member in this Litigation; and 3. CHECK ONE: I/we act as Executor/Administrator or Personal Representative of the estate (pending). I/we are authorized to act on behalf of the decedent successor in interest with respect to the decedent's interest in the class action settlement benefits derived from this Litigation. I/we agree to disburse the settlement benefits in accordance with the terms of the will or other applicable legal requirements. 🔟 There has been no estate opened or personal representative appointed for the decedent, and no proceeding is now pending in California for administration of the decedent's estate. I/we am/are the decedent's successor in interest and have sole entitlement to the class action settlement benefits derived from this Litigation. I/we have no knowledge of any unpaid claims against decedent or his/her estate. 4. No other person has a superior right to the settlement benefits derived from this Litigation or to be 5. substituted for the decedent with respect to the settlement benefits derived from this Litigation. 6. I/we understand that the In Re High Tech Employee Antitrust Litigation Settlement Administrator, together with its affiliates, is relying upon this Affidavit as an inducement to recognize my/our interest in the class action settlement. 7. A certified copy of the decedent's death certificate is attached hereto. In consideration of recognizing my/our interest in the class action settlement, I/we hereby agree to indemnify and hold harmless the In Re High Tech Employee Antitrust Litigation Settlement Administrator, together with its affiliates, its officers and directors, agents and employees from any claims, losses, or damages arising out of this claim of authority, including, but not limited to, any liability for State or Federal taxes, fees, or penalties. I declare under penalty of perjury under the laws of the state of California that the foregoing is true and correct. (Sign your name) Dated: (Sign your name) (Print your name) STATE OF VICTORIA

COUNTRY OF AUSTRALIA